



State of Nevada
Department of Business & Industry
Division of Insurance
INSURER COMPLAINT REPORTING FORM

Pursuant to NRS 689A.750, NRS 689B.029, NRS 695B.390, NAC 695F.630 or NRS 695G.220, certain licensed entities must file an annual complaint report on or before June 1 or each year for the previous year.

REPORTING YEAR

ORG ID #

Company Name

NAIC #

Name of Plan Being Reported

Type of Plan (Select One): ☐ 689A – Individual Health Plan
☐ 689B – Group Health Plan
☐ 695B – Non-Profit Plan
☐ 695C – HMO
☐ 695F – Pre-Paid Limited Health Organization

Complaint Category:	<u>Complaints Resolved</u>		<u>Complaints Under Appeal</u>	<u>Resolved Appeals</u>	<u>Total</u>
	<u>Verbal</u>	<u>Written</u>			
• Payment or Reimbursement	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Availability	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Delivery	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Quality of Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Terms & Conditions of Health Care Plan	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Other - Non Health	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Totals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insured/Member Data:

Number of Insureds/Members

Number of Complaints

Average Resolution Time (days):

Verbal Complaints

Written Complaints

Total Number of Complaints:

Verbal*

Written

*Note: Verbal complaints that have been converted to written complaints should only be counted as a written complaint

Submitted by:
Title:

Date:

Reports must be submitted via SERFF <https://login.serff.com/index.html> under the specific TOI “Required Industry Reports”. Reports submitted under the wrong TOI will be returned to the carrier for correction.